

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	22	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	25 minus 20 =	* 5
INDEPENDENT CLAIMS	4 minus 3 =	* 1
MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

## OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	740.00
X\$18=	90
X84=	84
+280=	280
TOTAL	1194

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus **	=
	Independent	* Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

## SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

## OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus **	=
	Independent	* Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus **	=
	Independent	* Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: \_\_\_\_\_

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.					Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101						=
Total Claims >20	203/103	_____ -20 =	_____	X			=
Independent Claims >3	202/102	_____ -3 =	_____	X			=
Mult. Dep Claim Present	204/104						=
Surcharge	205/105				<u>0</u>		=
English Translation	139						
<b><u>TOTAL FEE CALCULATION</u></b>							

Fees due upon filing the application:

Total Filing Fees Due = \$ 87.00

Less Filing Fees Submitted - \$ 1194.00

**BALANCE DUE** = \$ 87.00

Office of Initial Patent Examination

NOTICE OF FEE DUE

DATE: 03-11-02

TO: UTILITY

FROM: Office of Initial Patent Examination

SUBJECT: Fee Due

APPLICATION NUMBER: 10087364



A fee is due for the attached document submitted to the U. S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorization to charge a deposit account. If an authorization is present, please charge the appropriate fee. If an authorization is not present, notify the applicant of the fee deficiency.

☒ Insufficient fee by check

☐ Insufficient funds in deposit account

☐ Declined credit card

☐ Non authorization for charge to deposit account

☐ No fee submitted per requirement

The correct fee code: 103 amount \$ 90

The suspended fee code: 197 amount - \$ 3

Fee Due amount =\$ 87

If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz at 703-308-3642.

Terminal Operator AA D0F01